Foster Family Home - Corrective Action Report

5-150013-3

Provider ID: 5-150013

Home Name: Norwena Bacud Visitacion,

Review ID:

1975 Kaku Street

Reviewer:

Lihue

Н 96766

Begin Date: 1/26/2017 End Date:

Foster Family Home

Required Certificate

[17-1454-6]

6.(d)(1)

Comply with all applicable requirements in this chapter; and

Comment:

6 (d)(1) Home visit made on 1/26/2017 for a 2-bed recertification requested to change to 3-bed. Corrective action report issued during home visit with corrective action plan due to CTA on 2/26/2017

6 (d)(1) see applicable sections of this review.

Foster Family Home

Background Checks

[17-1454-7.1]

7.1.(a)(1)

Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

Comment:

7.1.(a)(1) Second finger printing not present in the home for CG#3

Foster Family Home

Personnel and Staffing

[17-1454-41]

| | [17-1404-41] | | |
|-----------------|--------------------------------------------------------------------------------------------------------------|--|--|
| 41.(a)(3) | Have at least one year of experience in a home setting as a NA, a LPN, or a RN; and | | |
| 41.(b)(7) | Have a current tuberculosis clearance that meets department of health guidelines; and | | |
| 41.(b)(8) | Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary | | |
| 41.(1)(1) | resuscritation, and basic first aid. Tuberculosis clearances that meet department of health guidelines; and | | |
| Comment: | and theer department of health guidelines; and | | |
| 41.(a)(3) Job E | XDerience document and | | |

41.(a)(3) Job Experience document not present in the home for CG#2 and CG#3.

41.(b)(7) and 41.(f)(1) Proof of positive/negative TB skin tests not present in the home for CG#1 and HHM#2. Lapsed in TB clearance due on/before 12/4/2015 done on 2/29/2016 for CG#1 and lapsed in TB clearance done on/before 5/1/16 done

41.(b)(8) Lapsed on CPR due on/before 1/15/16 done 1/16/16 and First Aid due on/before 1/15/16 done on 1/16/16 for CG#1. Lapsed for CPR due on/before 8/24/15 done on 8/26/15 and current First Aid not present in the home for CG#2.

Foster Family Home - Corrective Action Report

| Foster Family H | lome Fire | Safety | [17-1454-45] |
|-----------------------|------------------|-----------------------------------------------|--------------------|
| 45.(b)(2) Comment: | All caregivers h | ave been trained to implement appropriate eme | |
| 45.(b)(2) Docum | entation to cond | luct fire drill not present for CG#2 and CG# | ‡3 . |
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| | Compliance | Manage 1 | Date |
| | Compliance | viariager | Date |
| | Primary Care | Giver | Date |
| Page 2 of 2 | | | 1/26/2017 18:46 PM |

Written Plan Of Correction

2-15-2017

7.1(a)(1) Obtained 2nd fingerprint for CG #3 on 1-29-2017. The fingerprint is kept on the binder permanently.

41.(a)(3) Job experience by CG#2 on 1-28-2017 and by CG#3 on 1-29-2017. The 2 jobs experience are kept in the binder for CG#2 and CG#3.

41.(b)(7) and 41.(f)(1) - CG#1 had proof of tb clearance dated 1-27-2017 and proof of tb clearance for HHM#2 dated 1-27-2017. The 2 proof of tb clearance for CG#1 and HHM#2 are kept in the binder permanently. CG#1 and HHM#2 will not lapse on to clearance anymore.

41.(b)(8) CG#1 will not lapsed on CPR and First aid in the future. CG#2 will not lapsed on the CPR on the future. CG#2 completed first aid 8-26-2015. The plan to prevent lapses for tb clearnce, CPR and first aid by using the computer program to remind me before it expires to re new the requirements above and all requirements. Also the plan to prevent the CG#2 is to remind him before it expires.

45.(b)(2) CG#2 completed fire drill on 1-29-2017 and CG#3 on 2-3-2017. This will not happen again in the future because I will train all CGs and new CGs to implement appropriate emergency procedures in the event of fire.

2-15-2017

Tillintain (Norwena Visitacion)

1975 kaku st. lihue

HI 96766